

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		10	10-11-01
FORMALITY REVIEW	H-T	913	10/29/01

RESPONSE

CK  
SF

INDEX OF CLAIMS 1077

1109

1-11-02

5/2/02

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numerat) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Claim	Final	Original	Date
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BEST AVAILABLE COPY

1077  
 10/29/01  
 10/29/01  
 JE #876  
 05/03/02

If more than 150 claims or 10 actions  
staple additional sheet here

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